

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

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KIMBERLY D. LATHROP,

Plaintiff,

-against-

OSCAR C. DETUYA, III,

Defendant.

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**Docket No.:07 CV 3181
(WP4) (MDF)**

**AUTOMATIC
DISCLOSURE
STATEMENT
PURSUANT TO
FRCP RULE 26(a)(1)**

Pursuant to F.R.C.P. Rule 26 (a)(1), the plaintiff KIMBERLY D. LATHROP, by her attorneys MARVIN A. COOPER, P.C., sets forth the following disclosure:

A. WITNESSES

1. Ms. Kimberly Lathrop
40 Chapman Blvd.
Somers Point, New Jersey
2. Mr. Joe DiLeonardo
c/o Pro-Line Services
PO Box 442
Harrison, New York

B. DOCUMENTS

1. The Harrison Police Department's Police Accident Report dated 5-15-06
2. Photographs: (a) Two color copies of plaintiff's vehicle at locus dated 5-15-06
(b) Seven color copies of plaintiff's vehicle (unknown date)
(c) One color copy of plaintiff

Plaintiff reserves the right to provide additional photographs upon possession of the same, up to and including the time of trial.

C. DAMAGES

1. Medical records: Plaintiff has provided copies of all medical records, reports and bills. Authorizations for the medical records are also annexed hereto for the named medical providers as follows:

Port Chester Rye-Rye Brook EMS
417 Ellendale Avenue
Port Chester, New York 10573

Westchester Medical Center
Valhalla, New York 10595

Bryn Mawr Rehab Hospital
PO Box 8500-8685
Philadelphia, PA

Coastal Physicians & Surgeons
110 Harbor Lane
Somers Point, NJ 08244

Pace Orthopedic & Sports Medicine
517 New Road
Somers Point, NJ 08244

2. Lost Earnings: Plaintiff's employment information is listed hereinbelow. An authorization to obtain plaintiff's employment records is attached hereto.

Vitamin Shoppe
2101 91st Street
North Bergen, NJ 07047

3. Itemization of Special Damages:

a. Port Chester-Rye-Rye Brook EMS records dated 5/15/06 and bill	\$625.43
b. Westchester Medical Center's records dated 5/15/06 thru 5/20/06 (bill to follow)	- - - -
c. Bryn Mawr Rehabilitation Hospital's records dated 5/20/06 thru 5/31/06 and bill	\$30,833.60
d. Coastal Physicians and Surgeons' records dated 7/12/06 thru 7/24/06 and bill	\$800.00
e. Pace Physical Therapy's records, dated 6/19 thru 8/7/06 and bill	\$2,235.00
f. <u>Lost Earnings</u>	
The Vitamin Shoppe-Store Manager	
5/16/06 thru present (and continuing) -> 20 weeks	
Weekly earnings -> \$848.98	
\$848.98 x 20 weeks (through 8/29/06)	\$16,979.60
Total:	\$51,473.63 +

4. List of Injuries:

1. *Fracture of the left clavicle*
2. *Fracture of the left acetabulum*
3. *Fracture of the pelvis*
4. *Fracture of the left sacral ala*
5. *Multiple left upper bilateral rib fractures*
6. *A pseudoaneurysm in the left temporal artery*
7. *Post-traumatic vertigo*

D. COLLATERAL INSURANCE INFORMATION

The only relevant collateral insurance information is Workers' Compensation Insurance as follows:

Crum & Foster

305 Madison Avenue
Morristown, NJ 07962
Claim#NJU00330745

An authorization to obtain the Workers' Compensation file is attached hereto.

Dated: July 19, 2007
White Plains, New York

MARVIN A. COOPER, P.C.

S/ William H. Cooper (#9613)
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To: John W. Kondulis, Esq.
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